



Professional Insurance Brokers, Inc.

January 5, 2006

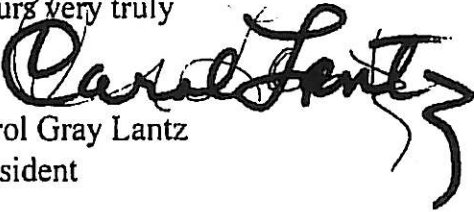
State of Arizona
Department of Environmental Quality
Contracts and Procurement Unit
Phoenix, AZ

Re: Tierra Dynamic Company Inc
Solicitation #SCC060008

To Whom It May Concern:

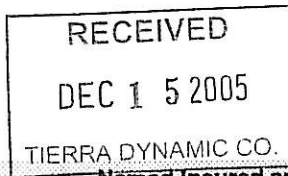
Please be advised that the limits of insurance as respects Professional, Commercial General and Hired and Non Owned Automobile Liability Coverages as outlined can be provided on behalf of Tierra Dynamic Company Inc.

Yours very truly


Carol Gray Lantz
President

Professionals Serving Professionals

PMB 857, 515 E. Carefree Highway . Phoenix, Az 85085-8839 v.623.465.5300 f.623.465.5933 v.1.800.666.2008
email. insurance@pibinc.com



RENEWED BUSINESS ACCOUNT PACKAGE POLICY

SPECIAL FORM

Policy Number	Named Insured and Address	From	Policy Period	To
2024313486	TIERRA DYNAMIC COMPANY LLC PO Box 35188 PHOENIX, AZ 85069	01/15/2006		09/18/2006

Agency Number	Agency Address	Coverage Provided By
999560886	VOSCO - PHOENIX TWO WISCONSIN CIRCLE CHEVY CHASE, MD 20815	Transportation Insurance Co CNA Plaza Chicago, Illinois 60685

This policy becomes effective and expires at 12:01 A.M. standard time at your mailing address on the dates shown above.

The Named Insured is a Limited Liability Corp.

Your policy is composed of this Declarations, with the attached Common Policy Conditions, Coverage Forms, and Endorsements, if any. The Policy Forms and Endorsement Schedule shows all forms applicable to this policy at the time of policy issuance.

The Policy Premium is	\$596.00
Total Policy Charges	\$596.00
Terrorism Risk Insurance Act Premium	\$2.00

For your locations in the states of IL, LA, NJ, NY and OK Terrorism Endorsement G-144225-A and Terrorism Policyholder Notice G-144233-B applies: in all other states & DC, Terrorism Endorsement G-144234-B applies

In return for the payment of the premium, and subject to all the terms and conditions contained herein, we agree to provide the insurance as stated.

This section summarizes the included limits and coverages on your policy.

BUSINESS LIABILITY

Limits of Insurance

Liability and Medical Expenses	\$1,000,000
Medical Expenses (Per Person)	\$10,000
Fire Legal Liability (Any One Fire or Explosion)	\$100,000
Products/Completed Operations Aggregate	\$2,000,000
General Aggregate (Other Than Products/Completed Operations)	\$2,000,000
Hired and Non-Owned Auto Liability (Each Occurrence)	\$1,000,000

PROPERTY AND MISCELLANEOUS COVERAGES

Limits of Insurance

Policy Deductible* \$250
*Refer to Deductible Provisions in the Special Property Coverage Form for Deductible Exceptions.

**BUSINESS
AUTO
DECLARATIONS**
☒ **POLICY**
☐ **COVERAGE PART**

MID-CENTURY INSURANCE COMPANY
MEMBERS OF FARMERS INSURANCE GROUP OF COMPANIES
HOME OFFICE: 4660 WILSHIRE BLVD., LOS ANGELES, CALIFORNIA 90010

ITEM ONE

NAMED : TIERRA DYNAMIC COMPANY
INSURED :
MAILING : PO BOX 35188
ADDRESS : PHOENIX AZ 85069-5188

Prematic Acc't No.
88-37-394
Agent

Prod. Count
60208-35-10
Policy Number

The named insured is an individual
unless otherwise stated:

☐ Partnership ☒ Corp. Type of Business **ENGINEERING FIRM**
☐ Joint Venture ☐ Organization (Other than Partnership or joint venture)

Policy Period from **11/01/05** (not prior to time applied for) to **10/30/06** 12:01 AM Standard Time

If this policy replaces other coverages that end at noon standard time on the same day this policy begins, this policy will not take effect until the other coverage ends. This policy will continue for successive policy periods as follows: If we elect to continue this insurance, we will renew this policy if you pay the required renewal premium for each successive policy period subject to our premiums, rules and forms then in effect.

ITEM TWO SCHEDULE OF COVERAGES AND COVERED AUTOS

*This policy provides only those coverages where a charge is shown in the premium column below. Each of these coverages will apply only to those "autos" shown as covered "autos". "Autos" are shown as covered "autos" for a particular coverage by the entry of one or more of the symbols from the COVERED AUTO Section of the Business Auto Coverage Form next to the name of the coverage.

COVERAGES	* COVERED AUTOS	LIMIT THE MOST WE WILL PAY FOR ANY ONE ACCIDENT OR LOSS (LIMITS SHOWN IN THOUSANDS)	PREMIUM
LIABILITY	7 8 9	\$ 1000	3,287.00
PERSONAL INJURY PROTECTION (or equivalent No-Fault Coverage)		SEPARATELY STATED IN EACH PIP ENDORSEMENT	
ADDED PERSONAL INJURY PROTECTION (or equivalent added no-fault cov.)		SEPARATELY STATED IN EACH ADDED PIP ENDORSEMENT	
PROPERTY PROTECTION INSURANCE (Michigan only)		SEPARATELY STATED IN THE P.P.I. ENDORSEMENT MINUS \$ DEDUCTIBLE FOR EACH ACCIDENT	
AUTO MEDICAL PAYMENTS	7	\$ SEE SCHEDULE	240.00
UNINSURED MOTORIST	7	\$ SEE SCHEDULE	174.00
UNINSURED MOTORIST PROPERTY DAMAGE		\$	
UNDERINSURED MOTORISTS (When not incl. in Uninsured Motorists Coverage)	7	\$ 500	534.00
PHYSICAL DAMAGE COMPREHENSIVE COVERAGE	7	Actual Cash Value or Cost of Repair, whichever is less minus \$ SEE SCHEDULE Ded. for Each Covered Auto. But no Deductible Applies to Loss Caused by Fire or Lightning. See Item Four for hired or borrowed "autos".	295.00
PHYSICAL DAMAGE SPECIFIED CAUSES OF LOSS COVERAGE		Actual Cash Value or Cost of Repair, whichever is Less Minus \$25 Ded. for Each Covered Auto for loss Caused by Mischief or Vandalism. See Item Four for hired or borrowed "Autos".	
PHYSICAL DAMAGE COLLISION COVERAGE	7	Actual Cash Value or Cost of Repair whichever is less minus \$ SEE SCHEDULE Ded. for Each Covered Auto. See item four for hired or borrowed "Autos".	397.00
PHYSICAL DAMAGE TOWING AND LABOR		\$ for each disablement of a private passenger "auto." (ACTUAL LIMIT)	
PREMIUM FOR ENDORSEMENTS			25.00
ESTIMATED TOTAL PREMIUM			4,927.00



WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY

TYPE OF OWNERSHIP: LIMITED LIABILITY COMPANY

OWNER NAMES:

KELLEY, J DAN
KELLEY, ONA LEEItem 2. Policy Period: FROM: 6-01-05 TO 6-01-06
12:01 a.m. Arizona Time at the address of the insured as stated herein

Item 3. A. Workers Compensation Insurance: Part One of the policy applies to the Workers Compensation Law of Arizona.

B. Employers Liability Insurance: Part Two of the policy applies to work in Arizona

The limits of our liability under Part Two are:

Bodily Injury by Accident \$ 1,000,000 each accident.

Bodily Injury by Disease \$ 1,000,000 each employee

Bodily Injury by Disease \$ 1,000,000 policy limit.

C. Other States Insurance: Part Three of the policy applies to Arizona Employers per the terms of the Other States Coverage Endorsement.

Item 1. NAME OF INSURED

TIERRA DYNAMIC COMPANY
P O BOX 35188
PHOENIX AZ 85069

See Item 4, below for other workplaces not shown above.

THE COMPANY RESERVES THE RIGHT TO EXCLUDE COVERAGE UNDER PART TWO FOR REJECTORS		PREMIUM BASIS		RATES	ESTIMATED ANNUAL PREMIUM
Item 4. Classification of Operations	The premium for this policy will be determined by our manual of rules, classifications, rates and rating plans. All information required below is subject to verification and change by audit.	Estimated Total Annual Remuneration		Rate Per \$100 of Payroll	
8152 N 23RD AVE STE A PHOENIX AZ	85021				
8601 ENGINEER OR ARCHITECT - CONSULTING		252,925		.51	1,290
8742 SALESPERSONS, COLLECTORS OR MESSENGERS OUTSIDE		43,820		.43	188
8742 COVERED MEMBER(S)		28,800		.43	124
8810 CLERICAL OFFICE EMPLOYEES NOC		126,728		.23	291
* THIS IS NOT A BILLING * MANUAL PREMIUM					1,893
EMPLOYER'S LIABILITY MINIMUM CHARGE					75
STATE FUND'S PREMIUM DEVIATION 10.0%					1,771
9740 TERRORISM RISK INS. ACT (SEE ENDORSEMENT 1099)		452,273		.03	136
9741 DTEC (SEE ENDORSEMENT 0462)		452,273		.01	45
POLICY CHARGE (EXPENSE CONSTANT)					120
If indicated, interim adjustments of premium shall be made: QUARTERLY		Minimum Premium	157	Required Deposit Premium	586
Endorsement: Endorsement Description on Reverse Side		Total Estimated Annual Premium		2,072	

Numbers: 1005 1032A 1060 1065A 1075 1080 1035 1016 1099 0462

Anniversary Rating Date: JUNE Experience Modification Factor:

Countersigned MAY 18, 2005

PRESIDENT

AUTHORIZED REPRESENTATIVE

	Hudson Insurance Company
X	Hudson Specialty Insurance Company (A New York Domiciled Company)

Policy Number: FEC6103465

Renewal Of: Not Applicable

Named Insured Tierra Dynamic Company LLC 8152 North 23rd Avenue Phoenix, AZ 85069	Program Administrator Freberg Environmental, Inc. 1451 Larimer Street, Suite 200 Denver, Colorado 80202
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Policy Period	
From: 09/18/2005	To: 09/18/2006 At 12:01 am Standard Time at your mailing address shown above

In return for the payment of premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

This policy consists of the following Coverage Parts as indicated:	Premium
Commercial General Liability Coverage	Included
Contractors Pollution Liability Coverage	Included
Professional Liability Coverage	Included
Environmental Impairment Liability Coverage	Not Covered
Storage Tank Environmental Impairment Liability Coverage	Not Covered
Total Coverage Part Premium	\$12,494
Terrorism Coverage	\$0
Total Premium	\$12,494

FORMS APPLICABLE TO ALL COVERAGE PARTS: See FEI-0104-451-E Schedule of Forms and Endorsements and attached State specific Surplus Lines Warning.

These declarations together with the common policy conditions, coverage part declarations, coverage part coverage forms(s) and forms and endorsements, if any, issued to form a part thereof, complete the above numbered policy.

By: 
Authorized Representative
Freberg Environmental, Inc.

Pursuant to Arizona Revised Statutes section 20-401.01, subsection B, paragraph 1, this policy is issued by an insurer that does not possess a certificate of authority from the director of the Arizona Department of Insurance. If the insurer that issued this policy becomes insolvent, insureds or claimants will not be eligible for insurance guaranty fund protection pursuant to Arizona Revised Statutes title 20.

Policy Number: FEC6103465

Coverage Parts Attached (indicated with "X"):

Coverage Part		Policy Type
X	Commercial General Liability	Occurrence Form
X	Contractors Pollution Liability	Claims Made Form
X	Professional Liability	Claims Made Form

Limits of Insurance:

Regardless of the number of Coverage Parts written under this policy or applicable to any one *Occurrence, Claim, Wrongful Act or Pollution Condition*, the Limits of Insurance shown below apply once for the entire policy, and not separately for each Coverage Part.

Applicable to Contractors Pollution Liability Coverage Part:

\$ 1,000,000	Damages Limit for Each Occurrence, Claim or Pollution Condition
\$ 1,000,000	General Aggregate Limit
\$ 1,000,000	Claims Expense Limit for Each Claim
\$ 1,000,000	Claims Expense Aggregate Limit

Applicable to Professional Liability Coverage Part:

\$ 1,000,000	Damages Limit for Each Occurrence, Wrongful Act or Claim
\$ 1,000,000	General Aggregate Limit
\$ 1,000,000	Claims Expense Limit for Each Claim
\$ 1,000,000	Claims Expense Aggregate Limit

Applicable to Commercial General Liability Coverage Part:

\$ 1,000,000	General Aggregate Limit (Other Than Products-Completed Operations)
\$ 1,000,000	Products-Completed Operations Aggregate Limit
\$ 1,000,000	Personal and Advertising Injury Limit
\$ 1,000,000	Damages Limit for Each Occurrence or Claim
\$50,000	Fire Damage Limit (Any one Fire)
\$5,000	Medical Expense Limit (Any One Person)

Deductible:

Coverage	Amount	Type
Commercial General Liability	\$5,000	
Contractors Pollution Liability	\$5,000	per pollution condition
Professional Liability	\$5,000	per wrongful act

Retroactive Dates:

Coverage	Retroactive Date
Commercial General Liability	Not Applicable
Contractors Pollution Liability	03/01/99
Professional Liability	09/18/98

Premium Schedule:

Estimated Annual Gross Receipts:	\$1,900,000	Rate: \$6.58 per \$1,000 of gross receipts
Policy Period Minimum Earned Premium:	\$3,124	Minimum & Deposit Premium: \$12,494

Form of Business:

X Corporation	Joint Venture	Individual	Partnership	Other
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